

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

APPLICATION TO DRILL ☐DEEPEN ☐PLUG BACK ☐for an oil well ☐or gas well ☐

Hydrocarbon Test X

NAME OF COMPANY OR OPERATOR

Town Oil Co.

DATE

16205 W. 287 St.

Paola

Kansas 66071

Address

City

State

DESCRIPTION OF WELL AND LEASE

Name of lease Wix	Well number 24	Elevation (ground) 835
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WELL LOCATION 2140 (give footage from section lines) 2440
 ft. from (N) (S) sec. line ft. from (E) (W) sec. line

WELL LOCATION Section 9 Township 39N Range 29W County Bates

Nearest distance from proposed location to property or lease line: N/A feet
 Distance from proposed location to nearest drilling, completed or applied for well on the same lease: N/A feet

Proposed depth: 75 Drilling contractor, name & address: Town Oil Co. Rotary or Cable Tools: Rotary Approx. date work will start: When approved

Number of acres in lease: 120 Number of wells on lease, including this well, completed in or drilling to this reservoir: 0
 Number of abandoned wells on lease: 0

If lease, purchased with one or more wells drilled, from whom purchased: Name N/A No. of Wells: producing 0
 Address: injection 0
 inactive 0
 abandoned 0

Status of Bond
 Single Well ☐ Amt. Blanket Bond ☒ Amt. \$60,000 ☒ ON FILE ☒ ATTACHED

Remarks: (If this is an application to deepen or plug back, briefly describe work to be done, giving present producing zone and expected new producing zone) use back of form if needed.

N/A

Proposed casing program: N/A				Approved casing -- To be filled in by State Geologist N/A			
amt.	size	wt./ft.	cem.	amt.	size	wt./ft.	cem.

I, the undersigned, state that I am the _____ of the _____ (company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

Signature

Lester Town

Permit Number: 20315

Approval Date: 8/27/98

Approved By:

James H. Williams

☒ Drillers log required☒ E-logs required if run☒ Core analysis required if run☒ Drill stem test info. required if run☐ Samples required☒ Samples not required

Note. This Permit not transferable to any other person or to any other location.

Remit two copies to: Missouri Oil and Gas Council
 P.O. Box 260 Rolla, Mo. 65401

One will be returned for driller's signature

WATER SAMPLES REQUIRED ☐

Approval of this permit by the Oil and Gas Council does not constitute endorsement of the geologic merits of the proposed well nor endorsement of the qualifications of the permittee.

3/12/82



MISSOURI DEPARTMENT OF NATURAL RESOURCES
MISSOURI OIL AND GAS COUNCIL
PLUGGING RECORD

FORM OGC-1

OWNER Town Oil Co.		ADDRESS 16205 W. 287 St. Paola, KS. 66071			
NAME OF LEASE Wix		WELL NUMBER 24	PERMIT NUMBER (OGC-3 OR OGC-31 NUMBER) 20315		
LOCATION OF WELL 2140' FSL 2440' FWL		SEC-TWP-RNG OR BLOCK & SURVEY 9-39N-29W	COUNTY Bates		
APPLICATION TO DRILL THIS WELL WAS FILED IN NAME OF Town Oil Co.	HAS THIS WELL EVER PRODUCED OIL OR GAS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CHARACTER OF WELL AT COMPLETION (INITIAL PRODUCTION) OIL (BBLS/DAY) N/A GAS (MCF/DAY)	DRY?		
DATE ABANDONED 8-25-98	TOTAL DEPTH 67'	AMOUNT WELL PRODUCING PRIOR TO ABANDONMENT OIL (BBLS/DAY) N/A GAS (MCF/DAY)	WATER (BBLS/DAY)		
Name of each formation containing oil or gas. Indicate which formation open to well bore at time of abandonment.	Fluid content of each formation	Depth interval of each formation	Size, kind, & depth of plugs used, giving amount cement.		
N/A			5 sacks cement		
SIZE PIPE N/A	PUT IN WELL (FT)	PULLED OUT (FT)	LEFT IN WELL (FT)	GIVE DEPTH AND METHOD OF PARTING CASING (SHOT, RIPPED, ETC.)	PACKERS AND SHOES
WAS WELL FILLED WITH MUD-LADEN FLUID?		INDICATE DEEPEST FORMATION CONTAINING FRESH WATER			
NAME AND ADDRESSES OF ADJACENT LEASE OPERATORS OR OWNERS OF THE SURFACE					
NAME		ADDRESS		DIRECTION FROM THIS WELL	
N/A					
				RECEIVED	
				DEC 10 1998	
				MO Oil & Gas Council	
METHOD OF DISPOSAL OF MUD PIT CONTENTS N/A					
NOTE	FILE THIS FORM IN DUPLICATE WITH (USE REVERSE SIDE FOR ADDITIONAL DETAIL)				
CERTIFICATE I, the undersigned, state that I am the partner of the Town Oil Co. (Company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct, and complete to the best of my knowledge.					
SIGNATURE Lester Town				DATE 12-2-98	